2 3 As a below named inventor, I hereby declare that:

My residence, past office address and citizenship are as stated below pert to

(If plural inventors are named	below) of the subject matter which is of OR TEACHING WRITING USING N	if only one name is listed below) or an or claimed and for which a patent is sought (UCROANALYSIS OF TEXT	on the invention entitled:
described and claimed in the	specification:		
Check one	_		
*a. 🛛 attached			
b. 🔲 filed on	as Application No and a	mended on (if applicable).	
amended by any amendment	referred to above.	ontents of the above-identified specifica	-
acknowledge the 37, Code of Federal Regulation		mation known to me to be material to pa	ntentability as defined in Title
Under Title 35, U. application(s) filed by me or a	 Code §119, the priority benefits of my legal representatives or assigns wi 	the following foreign application(s) and thin one year prior to this application are	Vor United States provisional hereby claimed:
None			
States of America either (a) r		ificate on this invention were filed in continuous of the filing date of the	
None			
	he following as my attorneys of reco business in the Parent Office:	ord with full power of substitution and	revocation to prosecute this
Marin	Kirk M. Hudson, Reg. No. 27,562; Edward P. Walker, Reg. No. 31,45	Villiam P. Berridge, Reg. No. 30,024; Thomas J. Pardini, Reg. No. 30,411; 0; Robert A. Miller, Reg. No. 32,771; Stephen J. Roe, Registration No. 3	14 463
ALL CORRESPONDENCE	·	APPLICATION SHOULD BE SENT	
I hereby declare the own knowledge are true and were made with the knowled	at I have reviewed and understand the that all statements made on informatic ge that willful false statements and the	contents of this Declaration, and that all a on and belief are believed to be true; and like so made are punishable by fine or illful false statements may jeupardize the	further that these statements imprisonment or both, under
ypewriaen Full Name			
First or Sale Inventor	Livia		POLANYI
	Given Name	Middle Initial	Family Name
Inventor's Signature:		·	
Date of Signature;	JUD	e 29,2000	
	Month	Day	Year
Residence:	Palo Alto	California	U.S.A.
	City	State or Province	Country

Palo Alto, California 94306, U.S.A. including country) *If Box (a.) is checked, this form may be executed only when attached to the specification (including claims). **Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

1037 Villa Vista

Post Office Address

(Insert complete mailing address.

IF THERE IS MURE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE \boxtimes

10/96

Citizenship:

i	2	20 12 12 12 12 12 12 12 12 12 12 12 12 12	
:	Ŀ	Ē	
		H.	-
*****		=	
:	ż	Ī	
:	,	ą	
:	=	red unit	
•	2	Fran.	
:	=		
:	=	H Harr	
:	:	Her.	
	ľ	Ę	
:	=	.4	
:	:	=======================================	

Typewritten Full Nan of Second Joint Inves		Martin	нет.	VAN DÊN BERI
		Given Name	Middle Initial	Family Name
**Inventor's Signatur	с :			
**Date of Signature:		11-70	ine 29, 20	60
		Month	/ Day	Year
Residence:	Palo Al		California	USA
Citizenship:	City Notherlands		State or Province	Country
Ciezensup.	Post Office Address:			
	(Insert complete	4037 Villa Vista		
	mailing address,			
	including country)	Palo Alto, Californio 94:	306, U.S.A.	
Typewritten Full Nan			•••	
of Third Joint Invent	nr (g any)	Given Name	Yian Middle Initial	LIEW Family Name
**Inventor's Signature	۵.	Given Name	Mildule Initial	raniiy Name
**Date of Signature:		<u> </u>		
""Date to Algorithe.	<u>Jun</u>	<u>e</u>	39	2000
D!	Month		Day	Ycar
Residence:	Cupcetie		California	U.\$. A .
	City		State or Province	Country
Citizenship:	Singapore			
	Post Office Address:			
	(Insert complete	11756 Pine Brook Coun		
	mailing address,			
	including country)	Compains California 95	A 211 MO	
Tomanantian Euli Nau	including country)	Cupertino, California 95	014, U.S.A.	
Typewritten Full Nan of Fourth Joint Inven		Cupertino, California 95	014, U.S.A.	
Typewritten Full Nan of Fourth Joint Inver				Day h.M.
of Fourth Joint Inven	ne ntor (if uny)	Cupenino, California 95 Given Name	014, U.S.A. Middle Initial	Family Name
of Fourth Joint Inven	ne ntor (if uny)			Family Name
of Fourth Joint Inven	ne ntor (if uny)	Given Name	Middle Initial	
of Fourth Joint Inven	ne ntor (if uny)			Family Name
of Fourth Joint Inven	ne ntor (if uny) c:	Given Name	Middle Initial	Veяr
**Inventor's Signature: **Date of Signature: Residence:	ne ntor (if uny)	Given Name	Middle Initial	
of Fourth Joint Inventor's Signature:	ne ntor (if uny) c:	Given Name	Middle Initial Day	Vest
**Inventor's Signature: **Date of Signature: Residence:	City Post Office Address:	Given Name Month	Middle Initial Day	Vest
**Inventor's Signature: **Date of Signature: Residence:	City Post Office Address: (Insert complete	Given Name Month	Middle Initial Day	Vest
**Inventor's Signature: **Date of Signature: Residence:	Post Office Address: (Insert complete mailing address.	Given Name Month	Middle Initial Day	Vest
**Inventor's Signature: **Date of Signature: Residence: Citizenship:	Post Office Address: (Insert complete mailing address, including country)	Given Name Month	Middle Initial Day	Vest
**Inventor's Signature: **Date of Signature: Residence: Citizenship:	Post Office Address: (Insert complete mailing address, including country)	Given Name Month	Middle Initial Day	Veяr
**Inventor's Signature: **Date of Signature: Residence: Citizenship:	Post Office Address: (Insert complete mailing address, including country)	Given Name Month	Middle Initial Day State or Province	Vent
**Inventor's Signature: **Date of Signature: Residence: Citizenship:	Post Office Address: (Insert complete mailing address, including country) me por (if any)	Given Name Month	Middle Initial Day	Vest
**Inventor's Signature: **Uate of Signature: Residence: Citizenship: Typewritten Full Nanof Fifth Joint Inventor's Signature: **Inventor's Signature:	Post Office Address: (Insert complete mailing address, including country) me por (if any)	Given Name Month	Middle Initial Day State or Province	Vent
**Inventor's Signature: **Uate of Signature: Residence: Citizenship: Typewritten Full Nanof Fifth Joint Inventor	Post Office Address: (Insert complete mailing address, including country) me por (if any)	Given Name Given Name	Middle Initial Day State or Province Middle Initial	Vent Country Family Name
**Inventor's Signature: **Uate of Signature: Residence: Citizenship: Typewritten Full Namof Fifth Joint Inventor's Signature: **Dute of Signature:	Post Office Address: (Insert complete mailing address, including country) me por (if any)	Given Name Month	Middle Initial Day State or Province	Vent
**Inventor's Signature: **Uate of Signature: Residence: Citizenship: Typewritten Full Nanof Fifth Joint Inventor's Signature: **Inventor's Signature:	Post Office Address: (Insert complete mailing address, including country) re or (if any) e:	Given Name Given Name	Middle Initial Day State or Province Middle Initial	Country Family Name
**Inventor's Signature: **Uate of Signature: Residence: Citizenship: Typewritten Full Namof Fifth Joint Inventor's Signature: **Dute of Signature:	Post Office Address: (Insert complete mailing address, including country) me por (if any)	Given Name Given Name	Middle Initial Day State or Province Middle Initial	Vent Country Family Name

PAGE 2 OF U.S.A. DECLARATION FORM

**Nute to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

including country)